

PUBLIC HEALTH – SEATTLE & KING COUNTY
ENVIRONMENTAL HEALTH DIVISION
APPLICATION TO CHANGE DESIGNER OF RECORD

To Be Completed by the New Designer of Record and Submitted (with a \$35.00 fee)
to the Eastgate District Health Center, 14350 SE Eastgate Way, Bellevue, WA 98007

Site Application Activity Number **H** _____

Parcel # _____

Lot # _____ Block # _____ Division # _____

Subdivision # or Name _____

Site Address _____
(as appears on site application)

Owner's Name _____
(please print)

Previous Designer of Record _____ K.C.I.D.# _____
(please print) (not company name)

New Designer of Record _____ K.C.I.D.# _____
(please print) (not company name)

Through personal field observations of the above site on _____, 19__, I verified that this site meets the criteria of the original approved design. Based upon this inspection, I accept full responsibility as designer of record for the site referenced above.

Attachments

- ☐ Letter from the property owner stating that he/she is discharging the named designer of record and naming a new designer of record. The letter is to include the address and parcel number of the subject property and the activity number of the subject activity. Written notice regarding this matter has been forwarded to the former designer of record.

(Designer's Signature) (Date)

FOR HEALTH DEPARTMENT USE ONLY

☐ \$35.00 Fee Received

☐ Application Complete: _____ BY: _____
Enter new Designer (date)

☐ Application Incomplete: _____ BY: _____
Do not enter new (date)
Designer of Record

Comments/Conditions: _____

Date Received